# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2008

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

	_	For the	2008 calen	dar year,	or tax year beginning	, 200	8, and endin	g		<del>-</del>		
	В	Check if a	applicable						D Employ	er Identificat	on Number	
		Addi	ress change	Please use IRS label	RICHARD & LOIS GUNTHER	R FAM. FOUN	NOTTAC		95-	4690753	3	
		Naπ	ne change	or print or type	C/O JEWISH COMMUNITY H				E Telepho	ne number		
		Initia	al return	See specific	6505 WILSHIRE BLVD. #1	1200			323	-761-8	700	
		Tern	nination	Instruc- tions	LOS ANGELES, CA 90048							
		Ame	ended return						G Gross r	eceipts \$	191,	714.
		Appl	lication pending	F Name a	and address of principal officer RICHAR	D S. GUNTH	ER	H(a) is this	a group retur	n for affiliates	<sup>?</sup> Yes	X No
		ш		SAME A	AS C ABOVE				affiliates incl		Yes	☐ No
	ī	Tax-e	exempt statu			4947(a)(1) or	527	IT TNO,	attach a list	(see instructi	ons)	
	J		site: N/					H(c) Group	exemption nu	ımber ►		
	ĸ	Туре о	f organization	X Corpora	ation Trust Association Other	r► L	Year of Format	ion 1998	8 <b>M</b> s	State of legal	domicile CA	
	Pa	rt I	Summa	ary			-		•			
		1 B	Briefly descri	be the org	ganization's mission or most signific	ant activities	THE RICH	ARD AN	D LOIS	GUNTH	ER FAMII	<u>Y</u>
	Ð				LANTHROPIC GIVING AIMS							
	Activities & Governance	نہ ا	JEWISH_A	ND_SEC	ULAR_ORGANIZATIONS			. <b></b> -				
	ern	_										
	3ov				if the organization discontinued its		sposed of mo	ore than 2	5% of its	1 - 1		_
	8			-	bers of the governing body (Part V	•	1h)			3 4		5 4
	les	1			it voting members of the governing byees (Part V, line 2a)	body (Part VI, III	ne ro)			5		0
	tivit				eers (estimate if necessary)					6		0
	Ac				ousiness revenue from Part VIII, line	e 12, column (C)				7a		0.
			_		s taxable income from Form 990-T,					7b		0.
								Р	rior Year		Current Ye	ar
		<b>8</b> C	Contributions	and gran	its (Part VIII, line 1h)			1	,570,0	00.		
0	Revenue				ue (Part VIII, line 2g)							
2009	eve	<b>10</b> Ir	nvestment in	ncome (Pa	art VIII, column (A), fines 3, 4 and		695,7	12.	-4,154,			
7	Œ	<b>11</b> C	ther revenu)	e (Part VI	III, column (A), lines 5, 6d, 8c, 9c, 1	0c, and 11e)						589.
<b>©</b>					nes 8 through 11 (must equal Part \		line 12)		,265,7		-3,963,	
(N)					ounts paid (Part IX, column (A), line			1	, 631, 5	595.	778,	853.
DEC			=		members (Part IX, column (A), line							
	ø			-	nsation, employee benefits (Part IX,		es 5-10)		<del> </del>			
$\bigcirc$	nse				g fees (Part IX, column (A), line 11							
<b>#</b>	Expenses	<b>ы</b>  ⊤	Total functions expenses (Part IX, column (D), line 25)									
Z	ш	17 6	ther expens	es (Part I	X, column (A), lines 11a-11d, 11f-2	4f)			8,0	52.	3,	230.
SCANNED					ឿes 1βΦ (must equal Part IX, colu			1	,639,6	47.	782,	083.
Ñ					s Suppert line 18 from line 12				626,0	65.	-4,745,	383.
	8 8							Begir	ning of Y	'ear	End of Yea	ar
	Assets or 1 Balancos	20 1	otal asset		de 16)				, 370, 4		6,259,	
	\$ P	<b>21</b> T	otal liabilitie	s (Part X,	, line 26)				35,€	00.	670,	003.
	FEE	<b>22</b> N	let assets or	fund bala	ances Subtract line 21 from line 20			10	, 334, 8	01.	5,589,	418.
	Pa	rt II		ure Bloc		· - · · ·						
			Under penaltie	s of peruify.	I declare that have examined this return, inclu Declaration of preparer (other than officer) is t	ding accompanying so	hedules and stat	ements, and	to the best of	f my knowled	ge and belief, it	ıs
			true, correct, a	ind complete	Declaration of preparer officer than officer) is b	pased on all information	on of which prepa	irer has any i	knowledge <i>I</i>	,		
	Sig	ign   Must								09		
	He	re	Signature					Da	te (	,		
				ucun		reasurar	_					
			Type or pr	int name and	d title	- · · ·						
							Date	Ci	neck if	Prepare (see in:	er's identifying n structions)	umber
	Pai		Preparer's signature	_	1. a.M.		ĺ	er	nployed -			
	Pre	er's	signature	<u> </u>	a Ci.		11/03/0	9				
	Use		Firm's name (o		O A. ARJANI & CO., LLP							
	On		employed), address, and	<b>►</b> <u>301</u>		re 426		EI	EIN ► 95-4149172			
			ZIP + 4		ADENA, CA 91101			Pi	none no		578-197	
	_				with the preparer shown above? (se					X		No
4	BAA	\ For P	rivacy Act a	and Paper	work Reduction Act Notice, see the	e separate instru	ıctions.		TEEA0112L	12/22/08	Form <b>990</b>	(2008)

	1990 (2008) RICHARD & LOIS GUNITER FAM. FOUNDATION 95-4690/53 Page	<u>; 2</u>
Par		
1	Briefly describe the organization's mission.	
	THE RICHARD AND LOIS GUNTHER FAMILY FOUNDATION PHILANTHROPIC GIVING AIMS TO BENEFIT	_
	LOCAL, NATIONAL AND INTERNATIONAL JEWISH AND SECULAR ORGANIZATIONS.	_
		-
		-
_2	Did the organization undertake any significant program services during the year which were not listed on the prior	_
_	5 000 000 FT0	
		•
_	If 'Yes,' describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No	,
	If 'Yes,' describe these changes on Schedule O	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total	
	expenses, and revenue, if any, for each program service reported	
	, —————————————————————————————————————	_
4 a	(Code	)
	CHARITABLE GIVING	
		_
		_
		_
		-
		_
		-
		-
		_
		_
		_
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	_
46	(Code 1) (European C	_
40	(Code  ) (Expenses \$ including grants of \$) (Revenue \$	-)
		_
		-
		_
		_
		_
		_
		_
		_
		-
		_
		_
4 c	(Code) (Expenses \$ including grants of \$) (Revenue \$	)
		_
	+	_
		_
		_
		_
		-
		_
		-
•		-
		_
		_
		_
		_
	Other program services (Describe in Schedule O )	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	_
4e	Total program service expenses ► \$ 778,853. (Must equal Part IX, Line 25, column (B))	_

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5_		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9_		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	a Did the organization maintain an office, employees, or agents outside of the US?	14a		X
I	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		х
17		17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20	- <del>V</del>	X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and IL	21	X	V
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23	Х	
24 8	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25	24a		x
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
t	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26	Х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes.' complete Schedule L, Part III	27		Х
BAA		Form	990	(2008)

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28 a		Х
	<b>b</b> Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		X
	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28 c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule $M$	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31_		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule $R$ , Part $V$ , line $2$	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V. line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R. Part VI	37		Х
BAA		Form	gan /	2000

Part '	Statements Regarding Other IRS Filings and Tax Compliance				
	•		]	Yes	No
1 a E	nter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S iformation Returns Enter -0- if not applicable	1a 0			_
bЕ	nter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>1b</b> 0			
<b>c</b> D	id the organization comply with backup withholding rules for reportable payments to vendo gambling) winnings to prize winners?	ors and reportable gaming	1 c		
<b>2 a</b> E	nter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the ilendar year ending with or within the year covered by this return	2a 0			
2 b If	at least one is reported on line 2a, did the organization file all required federal employme	nt tax returns?	2ь		
N	ote. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this re	turn (see instructions)			
	ld the organization have unrelated business gross income of \$1,000 or more during the ye iis return?	ar covered by	3a		X
b If	'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule C	)	3b		<u> </u>
<b>4a</b> A	t any time during the calendar year, did the organization have an interest in, or a signatur nancial account in a foreign country (such as a bank account, securities account, or other	e or other authority over, a financial account)?	4a		Х
<b>b</b> If	'Yes,' enter the name of the foreign country				
S F	ee the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of inancial Accounts	Foreign Bank and			
	as the organization a party to a prohibited tax shelter transaction at any time during the ta	•	5a		X
	id any taxable party notify the organization that it was or is a party to a prohibited tax she		5 b		X
c If	'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exen rohibited Tax Shelter Transaction?	npt Entity Regarding	5 c		
<b>6a</b> D	d the organization solicit any contributions that were not tax deductible?		6a		X
	'Yes,' did the organization include with every solicitation an express statement that such deductible?	contributions or gifts were not	6 b		
7 C	rganizations that may receive deductible contributions under section 170(c).				
<b>a</b> D	d the organization provide goods or services in exchange for any quid pro quo contributio	n of more than \$75?	7a		X
	'Yes,' did the organization notify the donor of the value of the goods or services provided'		7b		<u> </u>
	ld the organization sell, exchange, or otherwise dispose of tangible personal property for v orm 8282?	which it was required to file	7с		Х
<b>d</b> If	'Yes.' indicate the number of Forms 8282 filed during the year	7d			
	ld the organization, during the year, receive any funds, directly or indirectly, to pay premit enefit contract?	ıms on a personal	7е		Х
f D	d the organization, during the year, pay premiums, directly or indirectly, on a personal be	nefit contract?	7f		X
g F	or all contributions of qualified intellectual property, did the organization file Form 8899 as	required?	7 g		
hF	or all contributions of cars, boats, airplanes, and other vehicles, did the organization file a	Form 1098-C as required?	7h		
8 S s e	ection 501(c)(3) and other sponsoring organizations maintaining donor advised funds ar upporting organizations. Did the supporting organization, or a fund maintained by a spons cess business holdings at any time during the year?	nd section 509(a)(3) soring organization, have	8		-
9 S	ection 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			_	
<b>a</b> D	d the organization make any taxable distributions under section 4966?		9a		
<b>b</b> D	d the organization make any distribution to a donor, donor advisor, or related person?		9Ь		<u></u>
10 S	ection 501(c)(7) organizations. Enter.				ļ
<b>a</b> Ir	itiation fees and capital contributions included on Part VIII, line 12	10a			İ
<b>b</b> G	ross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			1
	ection 501(c)(12) organizations. Enter	: 1			
	ross income from other members or shareholders	11 a			
aı	ross income from other sources (Do not net amounts due or paid to other sources against nounts due or received from them )	116			_
	ection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu	, ,	12a		<u> </u>
	'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
BAA			Form	990	(2008)

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

		Governing Body and Management				
	For each	Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, es, or changes in Schedule O. See instructions	describe the circumstances,		Yes	<u>No</u>
1	a Enter the	e number of voting members of the governing body	1a 5			
		e number of voting members that are independent	1ь 4			
2	Did any o	officer, director, trustee, or key employee have a family relationship or a business re lirector, trustee or key employee? SEE SCHEDULE O	elationship with any other	2	x	
	Did the o	organization delegate control over management duties customarily performed by or use, directors or trustees, or key employees to a management company or other personal trustees.	under the direct supervision	3		Х
4	Did the o	organization make any significant changes to its organizational documents eprior Form 990 was filed?		4		X
5		rganization become aware during the year of a material diversion of the organization	n's assets? SEE_SCH_O	5	х	
6		organization have members or stockholders?	ns assets Din Den O	6		X
	governin	~ .	!	7a		X
	<b>b</b> Are any o	decisions of the governing body subject to approval by members, stockholders, or of	ther persons?	7b		X
8	Did the o	organization contemporaneously document the meetings held or written actions under ving	ertaken during the year by			
	<b>a</b> The gove	erning body?		8a	X	
	<b>b</b> Each cor	nmittee with authority to act on behalf of the governing body?		8ь		
9	<b>a</b> Does the	organization have local chapters, branches, or affiliates?		9a		<u>X</u>
		does the organization have written policies and procedures governing the activities of ches to ensure their operations are consistent with those of the organization?	of such chapters, affiliates,	9b		
10	Was a co describe	ppy of the Form 990 provided to the organization's governing body before it was filed in Schedule O the process, if any, the organization uses to review the Form 990 $$ S	1 <sup>2</sup> All organizations must EE SCHEDULE O	10	Х	
11	Is there a	any officer, director or trustee, or key employee listed in Part VII, Section A, who ca tion's mailing address? If 'Yes,' provide the names and addresses in Schedule O	nnot be reached at the	11		Х
Sec		Policies				
	tion B.				Yes	No
	tion B.	Policies  organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Yes X	
12	tion B.  Does the	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests	that could give rise		Х	
12	Does the Are office to conflic	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests	Ŭ	12a	Х	
12	a Does the b Are office to conflic c Does the Schedule	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests ts?	Ŭ	12a 12b	х	
12	a Does the Are office to conflic C Does the Schedule Does the	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests ts?  organization regularly and consistently monitor and enforce compliance with the poet of how this is done.	Ŭ	12a 12b 12c	х	No
12 13 14	a Does the Are office to conflice C Does the Schedule Does the Does the	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests its?  organization regularly and consistently monitor and enforce compliance with the poer of how this is done  SEE SCHEDULE O  organization have a written whistleblower policy?	approval by independent	12a 12b 12c 13	X X X	No
13 14 15	b Are office to conflice c Does the Schedule Does the Does the Did the p persons,	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests its?  organization regularly and consistently monitor and enforce compliance with the policy organization have a written whistleblower policy?  organization have a written document retention and destruction policy?	approval by independent	12a 12b 12c 13	X X X	No
12 13 14 15	a Does the Are office to conflice C Does the Schedule Does the Does the Did the p persons, The organ	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests ts?  organization regularly and consistently monitor and enforce compliance with the pole O how this is done SEE SCHEDULE O organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and december to the comparability data, and contemporaneous substantiation of the deliberation and december to the comparability data.	approval by independent	12a 12b 12c 13	X X X	No
12 13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Does the Did the p persons, a The organ	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests ts?  organization regularly and consistently monitor and enforce compliance with the pole of how this is done SEE SCHEDULE O organization have a written whistleblower policy?  organization have a written document retention and destruction policy?  rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and demization's CEO, Executive Director, or top management official?	approval by independent	12a 12b 12c 13 14	X X X	No
13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other offi Describe Did the o	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests organization regularly and consistently monitor and enforce compliance with the policy? Organization have a written whistleblower policy? Organization have a written document retention and destruction policy? Organization have a written document retention and destruction policy? Organization have a written document retention and destruction policy? Organization data, and contemporaneous substantiation of the deliberation and destruction's CEO, Executive Director, or top management official?	approval by independent	12a 12b 12c 13 14	X X X	No
13 14 15	a Does the b Are office to conflic c Does the Did the p persons, a The organ b Other offi Describe a Did the or entity dur off 'Yes,' h in joint ve	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests organization regularly and consistently monitor and enforce compliance with the policy? Organization have a written whistleblower policy? Organization have a written document retention and destruction policy? Organization have a written document retention and destruction policy? Organization have a written document retention and destruction policy? Organization data, and contemporaneous substantiation of the deliberation and destruction's CEO, Executive Director, or top management official? Organization of the organization? Organization invest in, contribute assets to, or participate in a joint venture or similar ring the year?	approval by independent cision  arrangement with a taxable	12a 12b 12c 13 14 15a 15b 16a	X X X	X
13 14 15	a Does the b Are office to conflic c Does the Did the p persons, a The organ b Other offi Describe a Did the o entity dur b If 'Yes,' h in joint ve status with	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests organization regularly and consistently monitor and enforce compliance with the policy? Organization have a written whistleblower policy? Organization have a written document retention and destruction policy? Organization have a written document retention and destruction policy? Organization have a written document retention and destruction policy? Organization data, and contemporaneous substantiation of the deliberation and destruction's CEO, Executive Director, or top management official? Organization's cers of key employees of the organization? Organization invest in, contribute assets to, or participate in a joint venture or similar ring the year?	approval by independent cision  arrangement with a taxable	12a 12b 12c 13 14 15a 15b	X X X	X
12 13 14 15	a Does the b Are office to conflic c Does the Did the p persons, The organ Doescribe Did the organ Doescribe Did the organ	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests ts?  organization regularly and consistently monitor and enforce compliance with the policy of the organization have a written whistleblower policy?  organization have a written document retention and destruction policy?  rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and definization's CEO, Executive Director, or top management official?  Incers of key employees of the organization?  The process in Schedule O (see instructions)  organization invest in, contribute assets to, or participate in a joint venture or similar ring the year?  The organization adopted a written policy or procedure requiring the organization and the organization and taken steps to safeguard the respect to such arrangements?	approval by independent cision  arrangement with a taxable	12a 12b 12c 13 14 15a 15b 16a	X X X	X
12 13 14 15 16:	a Does the b Are office to conflic c Does the Did the p persons, The organ Doescribe Did the organ List the s Section 6	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests ts? organization regularly and consistently monitor and enforce compliance with the policy organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and demization's CEO, Executive Director, or top management official? Interest of key employees of the organization? Interest of key employees of the organization? Interest organization invest in, contribute assets to, or participate in a joint venture or similar ring the year? Interest organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard the respect to such arrangements?  Disclosures  Tates with which a copy of this Form 990 is required to be filed CA  1004 requires an organization to make its Forms 1023 (or 1024 if applicable). 990, and	approval by independent cision  arrangement with a taxable to evaluate its participation the organization's exempt	12a 12b 12c 13 14 15a 15b 16a	X X X	X
12 13 14 15 16:	Does the Schedule Does the Doe	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests tis? organization regularly and consistently monitor and enforce compliance with the policy of organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and definization's CEO, Executive Director, or top management official? Interest of key employees of the organization? Interest of the organization invest in, contribute assets to, or participate in a joint venture or similar ring the year? Interest the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard the respect to such arrangements?  Disclosures  tates with which a copy of this Form 990 is required to be filed   CA	approval by independent cision  arrangement with a taxable to evaluate its participation the organization's exempt	12a 12b 12c 13 14 15a 15b 16a	X X X	X
13 14 15 16: Sec 17 18	Does the bare office to conflict Does the Does t	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests ts?  organization regularly and consistently monitor and enforce compliance with the policy?  organization have a written whistleblower policy?  organization have a written document retention and destruction policy?  rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and demization's CEO, Executive Director, or top management official?  Incers of key employees of the organization?  the process in Schedule O (see instructions)  reganization invest in, contribute assets to, or participate in a joint venture or similar ring the year?  The organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard the respect to such arrangements?  Disclosures  tates with which a copy of this Form 990 is required to be filed CA  1004 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and indicate how you make these available Check all that apply	approval by independent cision  arrangement with a taxable to evaluate its participation the organization's exempt	12a 12b 12c 13 14 15a 15b 16a 16b	X X X	X

# Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

# Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order, individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees, and former such persons

(A)	ensate any officer, director, tru (c)						(D)	(E)	(F)	
Name and Title	Average hours		tion (		k all 1	hat app	ly)	Reportable compensation from	Reportable compensation from	Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W 2/1099-MISC)	amount of other compensation from the organization and related organizations
RICHARD S. GUNTHER	]									
PRESIDENT	0	X		X				0.	0.	0.
LOIS GUNTHER	ļ	İ			ĺ					
VICE PRESIDENT	0	X		Х		<u> </u>		0.	0.	0.
LUIS LAINER										
DIRECTOR	0	Х						0.	0.	0.
DAVID A. GILL	1									
DIRECTOR	0	X						0.	0.	0.
MARVIN I. SCHOTLAND										
SECRETARY	0	Х		Х				0.	451,613.	50,810.
SIMONE SAVLOV										
TREASURER	0			X				0.	222,064.	34,534.
JUTTA HILDEBRANDT						!				
ASST. SEC'Y	0			X				0.	0.	0.
R. STEVEN SHEAN										
ASST. TREASURER	0	<u> </u>		X				0.	168,622.	25,674.
MICHAEL JANUZIK										
TREASURER	0			Х				0.	142,311.	<u>4</u> ,280.
MARK H. GUNTHER	Į									
VICE PRESIDENT	0			Χ				0.	0.	0.
ANDREW J. GUNTHER									1	
VICE PRESIDENT	0			Χ				0.	0.	0.
DANIEL P. GUNTHER										
VICE PRESIDENT	0			Х				0.	0.	0.
										<del></del>
									İ	
	Į									

Average Proson (check all trail apply) representation from related organization is any former officer, director or trustee, key employee, or highest compensation from the organization from the organization of the organization or from the organization or from the organization or from the organization or from the organization or from the organization or from the organization or from the organization or from the organization or from the organization or from the organization or from the organization or from the organization is any former officer, director or trustee, key employee, or highest compensated employee on line 1a² If Yes; complete Schedule J for such individual  4. For any individual issed on line 1a, is the sum of reportable compensation and other compensation from the organization or from the organization is such as the sum of reportable compensation from the organization or from the organization and other compensation from the organization of the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation from the organization and other compensation and	(A)	(B)	l			c)	<del></del>	and	(D)	(E)	Joyce	(F)	11.)
and the organization list any former officer, director or trustee, key employee, or highest compensation from the organization list any former officer, director or trustee, key employee, or highest compensation from the organization is the organization of the la, is the year of the organization and other compensation from the organization and related organizations greater than \$150,000 in reportable compensation from the organization is the organization of the organization of the organization of the organization is the organization is the organization of the organization is the organization of the organization is the organization of the organization of the organization is the organization of the organization of the organization is the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the	, ·	Average	Posi	ition i		•	that a	pply)	• •	1	E	I	
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A) (B) (C)		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		compensation from	compensation from related organizations	con t orq a	unt of oth npensation from the ganization nd related anization	on n d
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)		-											
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)		-							-				
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)		_											
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)		_											
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)		_											
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)		-	_										
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)		-				_	_						
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)		_		ļ									
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0    Your and   O		_		_			_						
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0    Your and   O		_		ļ	ļ.,						<u> </u>		
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)		-	_								-		
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)		-			_								
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0  Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)		_				_	<u> </u>	Ĺ		094 610	<u> </u>	115 '	200
organization ► 0  74 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)		\ who roo	011/0	d m	010	tha	. ¢1					.13,2	230
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)	· · · · · · · · · · · · · · · · · · ·	, who rec	CIVC	<u> </u>		(i ici	. Ψι					<del></del>	
the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)	line 1a? If 'Yes,' complete Schedule J for such	ındıvıdu	al								3	Yes	No X
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A) (B) (C)	e organization and related organizations greater	reportabl r than \$1!	e co 50,00	mpe 00?	ensa If 'Y	ition 'es'	com	d oth	er compensation e Schedule J for	from such	4	X	
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)	I any person listed on line la receive or accrue indered to the organization? If 'Yes,' complete S	compen Schedule	satio J for	n fr	om ch_p	any ersc	unr	elate	d organization fo	r services	5		X
compensation from the organization  (A)  (B)  (C)	B. Independent Contractors	otod rode		400		ntro	otor	- the	t received more	than \$100,000 of			
(A) Name and business address  Description of Services  Compensi	npersation from the organization	ated moe	epen	uen	ı co	nura	Ctors	s ma	received more				
	(A) Name and business addr	ess							Description	of Services	Comp	(C) ensatio	חכ
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in	tal number of independent contractors (including	ng those i	n 1)	who	o red	ceiv	ed n	nore	than \$100,000 in	,			

Pa	t VIII Statement of Revenue				
	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events. d Related organizations e Government grants (contributions) 1 d 1 e 1 f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribns included in lins 1a-1f. \$				
8 ₹	h Total. Add lines 1a-1f				
Ě	Business Code				
Z-E	2a				
E.	b				
Š	c				
SEI	d				
RAR	e				
ည	f All other program service revenue				
	g Total. Add lines Za-Zi		<u> </u>		<u> </u>
	<ul> <li>Investment income (including dividends, interest and other similar amounts)</li> <li>Income from investment of tax-exempt bond proceeds</li> </ul>	125.			125.
	5 Royalties	191,589.			191,589.
	(i) Real (ii) Personal  6 a Gross Rents b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other			-	
	b Less cost or other basis and sales expenses  c Gain or (loss)  4,155,014.				
	d Net gain or (loss)	-4,155,014.	-	·	-4,155,014.
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b	1,135,011.			1,250,021.
	c Net income or (loss) from fundraising events	<del></del>			
	9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses b				
	c Net income or (loss) from gaming activities	-		•	-
	10 a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold b  c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code			-	
	<sup>11</sup> a				
	b				
	c				
	<b>d</b> All other revenue		<u> </u>		ļ
	e Total. Add lines 11a-11d				ļ
	<b>Total Revenue</b> . Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	-3,963,300.	0.	0.	-3,963,300.

# Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include an 6b, 7b, 8b, 9b, an	nounts reported on lines d 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and c and organiza line 21	other assistance to governments in the U.S. See Part IV,	778,853.	778,853.		
2 Grants and o	other assistance to individuals in Part IV. line 22	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
3 Grants and o	other assistance to governments, s, and individuals outside the rt IV, lines 15 and 16		· · · · · · · · · · · · · · · · · · ·		
4 Benefits paid	I to or for members				· · · · · · · · · · · · · · · · · · ·
	on of current officers, directors, key employees	0.	0.	0.	0.
disqualified p	on not included above, to persons (as defined under (f)(1) and persons described in (c)(3)(B).	0.	0.	0.	0.
7 Other salarie	s and wages.				
8 Pension plan 401(k) and s contributions	contributions (include section ection 403(b) employer )				
9 Other employ	vee benefits				
10 Payroll taxes					
11 Fees for serv	rices (non-employees)				
a Management					
<b>b</b> Legal	<u>‡</u>				
c Accounting		1,300.		1,300.	
<b>d</b> Lobbying					
e Prof fundrais	ing svcs See Part IV, In 17	_,	, <u>.</u>		
f Investment m	nanagement fees	500.		500.	
<b>g</b> Other					
12 Advertising a	nd promotion				
13 Office expens	ses				
14 Information to	echnology				
15 Royalties					
16 Occupancy	L	· <del>-</del>			
<ul><li>17 Travel</li><li>18 Payments of expenses for public official</li></ul>	travel or entertainment any federal, state, or local s		-		
19 Conferences,	conventions, and meetings				
20 Interest					
21 Payments to	affiliates				
22 Depreciation,	depletion, and amortization				
covered abov and labeled n 5% of total ex	es Itemize expenses not e (Expenses grouped together niscellaneous may not exceed openses shown on line 25	1,250.		1,250.	
below) a FILING F	EES	180.		180.	
d					
e					
f All other expe	<b>—</b>	700 000			·
Joint Costs. ( SOP 98-2 Co organization i costs from a	expenses. Add lines 1 through 24f Check here  if following omplete this line only if the reported in column (B) joint combined educational	782,083.	778,853.	3,230.	0.
Campaign and	fundraising solicitation				F 000 (0000)

re	וון א	Dalatice Sileet	<del></del>			
	•		(A) Beginning of year		(B) End of yea	ır
	1	Cash — non-interest-bearing		1		
	2	Savings and temporary cash investments	112,978.	2	157,	012.
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4		
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5		
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))				-
		and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6		
A S	7	Notes and loans receivable, net		7		
ASSETS	8	Inventories for sale or use		8		
T S	9	Prepaid expenses and deferred charges		9		
	10 a	Land, buildings, and equipment cost basis 10a				
	1	Less accumulated depreciation Complete Part VI of				
		Schedule D 10b		10c		
	11	Investments – publicly-traded securities	71,722.	11	71,	673.
	12	Investments – other securities See Part IV, line 11	5,880,736.	12	5,880,	
	13	Investments - program-related See Part IV, line 11	<u> </u>	13		
	14	Intangible assets		14		
	15	Other assets See Part IV. line 11	4,304,965.	15	150.	000.
	16	Total assets Add lines 1 through 15 (must equal line 34)	10,370,401.	16	6,259,	
	17	Accounts payable and accrued expenses		17	0, = 00,	
	18	Grants payable		18	302.	750.
	19	Deferred revenue		19		
Ļ	20	Tax-exempt bond liabilities		20		
Ā	21	Escrow account liability Complete Part IV of Schedule D		21		
LIABILIT	22	-				
Ī		Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II				
- 1		of Schedule L		22	310,	000.
E S	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable		24		
	25	Other liabilities Complete Part X of Schedule D	35,600.	25	57,	253.
	26	Total liabilities. Add lines 17 through 25	35,600.	26	670,	003.
Й		Organizations that follow SFAS 117, check here   X and complete lines			_	
N E T	]	27 through 29 and lines 33 and 34.				
Ą	27	Unrestricted net assets	10,334,801.	27	5,589,	418.
ASSETS	28	Temporarily restricted net assets		28		
	29	Permanently restricted net assets		29	·	
Q R		Organizations that do not follow SFAS 117, check here				
		lines 30 through 34.				
<b>UZ</b> 0	30	Capital stock or trust principal, or current funds		30		-
	31	Paid-in or capital surplus, or land, building, and equipment fund		31		
田々上々之い世の	32	Retained earnings, endowment, accumulated income, or other funds		32		
Ž.	33	Total net assets or fund balances.	10,334,801.	33	5,589,	418.
Š	34	Total liabilities and net assets/fund balances	10,370,401.	34	6,259,	
Pa	rt XI	Financial Statements and Reporting		<del></del>		
	•		<del> </del>		Yes	No
1	Acc	counting method used to prepare the Form 990 \tag{X} Cash \text{X} Accrual	Other			
		re the organization's financial statements compiled or reviewed by an independent	accountant?		2a	Х
		re the organization's financial statements audited by an independent accountant?			2b	X
			v for oversight of the a	udit.		
		res' to 2a or 2b, does the organization have a committee that assumes responsibilitiew, or compilation of its financial statements and selection of an independent acco			_2c	<u> </u>
3	a As	a result of a federal award, was the organization required to undergo an audit or au dit Act and OMB Circular A-133?	dits as set forth in the	Single	3a	
		res,' did the organization undergo the required audit or audits?			3b	┧──
BA		co, die the organization undergo the required addit of addits.			Form <b>990</b>	(2008)
						/

# SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

**Public Charity Status and Public Support** 

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047 2008

Open to Public Inspection

Name	of the	organization R	ICH	ARD & LOIS GUN	THER FAM. FOUNI	DATION				Employe	ridentifica	tion number	
				JEWISH COMMUNI							<u> 590753</u>		
Par	1	Reason fo	<u>r Pu</u>	blic Charity Statu	is (All organizations	must o	comple	te this	part.)	(see	nstruct	tions)	
The o	rga	nization is not	a pri	vate foundation becau	use it is (Please check o	only <b>one</b>	organiz	ation )					
1	Ш	A church, con	iventi	on of churches or ass	ociation of churches des	scribed in	section	n 170(b)	(TXAXI)	).			
2	Ш	A school desc	ribec	! in section 170(b)(1)(	A)(ii). (Attach Schedule	E)							
3		A hospital or	coop	erative hospital servic	e organization described	i ın <b>secti</b>	on 170(	χΑχΓχ <b>d</b>	<b>iii).</b> (At	tach Scl	nedule H	1)	
4		A medical res	earch	n organization operate	ed in conjunction with a	hospital (	describe	d in sec	tion 17	0(b)(1)(A	A)(iii) Er	nter the ho	spital's
	_	name, city, ar											
5		170(b)(1)(A)(i	v). ((	Complete Part II)	of a college or universit			-	_	rnmenta	l unit de	scribed in :	section
6 7	Щ	An organization	on th		governmental unit descr i substantial part of its s art II )					t or fron	n the gei	neral public	described
8		A community	trust	described in section	170(b)(1)(A)(vi). (Comple	ete Part I	II )						
9		from activities investment in	relate come	ed to its exempt function	more than 33-1/3 % of its ns – subject to certain exc ess taxable income (less complete Part III.)	eptions,	and (2) r	no more t	than 33-	1/3 % of	its suppl	ort from gro	SS
10		An organization	on or	ganized and operated	exclusively to test for p	ublic saf	ety See	section	n 509(a)	<b>(4).</b> (se	e instruc	tions)	
11	X	more publicly	SUDD	orted organizations of	exclusively for the bene described in section 509- zation and complete line	(a)(1) or	section	509(a)(2	ctions ( 2) See	of, or ca <b>section</b>	rry out tl <b>509(a)(</b> 3	he purpose <b>3).</b> Check t	s of one or he box that
		a X Type I	,,	<b>b</b> Type II	c Type I		_		ted		d $\square$	Type III-	Other
е	X	By checking t	his bo	ox, I certify that the or anagers and other tha	rganization is not contro in one or more publicly s	lled dired	ctly or in	directly	by one	or more ed in se	disqual ction 509	ified perso	ns other
f		If the organization		received a written det	termination from the IRS	that is	a Type I	, Type II	l or Typ	e III sup	porting	organızatıo	n, 🔲
g		Since August	17, 2	2006, has the organiza	ition accepted any gift	or contrib	oution fro	om any	of the f	ollowing	persons	37	
													Yes No
		(i) a persor	n who	o directly or indirectly	controls, either alone or upported organization?	togethe	with pe	ersons d	escribe	d in (ii) i	and (III)	11 g (i)	<sub>X</sub>
			_	nber of a person desc								11 g (ii)	X
		• •		•	n described in (i) or (ii) a	ahove?						11 g (iii)	<del>                                     </del>
h		• •		• •	the organizations the or		n sunno	rte				119(111)	1
<del></del>	r:	Name of Supporte		(ii) EIN	(iii) Type of organization	<u> </u>	is the	1	ou notify	(40)	s the	(viv) Amou	nt of Support
	U.	Organization	iu.	(i) Liv	(described on lines 1-9 above or IRC section (see instructions))	organiza: (i) liste: gove	tion in col d in your erning ment?	the organ	nzation in (i) of	organizat	ion in col zed in the	(VII) Allious	н от опрроге
						Yes	No	Yes	No	Yes	No		
JEW	ISI	COMMUNI	ry i	OUNDATION									
				95-6111928	9	Х		Х		х			70,103.
		-											
						<del> </del>							<del></del> -
						-			<u> </u>				<del></del>
Total													70,103.

	t II Support Schedule for					95-4690/53	
Pai	(Complete only if you check	-				iu 170(b)(1)(A)(	VI)
Sec	tion A. Public Support	ed the box on the	2, 7, 01 0 011 41	(1)	···,	<del> </del>	
Cale	ndar year (or fiscal year nning in) >	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
4	Total. Add lines 1-3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
	Public support. Subtract line 5 from line 4						
	tion B. Total Support			T.	T	<u> </u>	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4		·				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
9	Net income form unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10			-			
12	Gross receipts from related activ	rities, etc (see in:	structions)			12	
	First five years. If the Form 990 organization, check this box and	stop here	·	nd, third, fourth,	or fifth tax year a	s a section 501(c)	(3)
	Dublic current percentage for 20			no 11 - anivers - 10		1 4 1	
15	Public support percentage for 20 Public support percentage for 20			, ,,		14	<u>%</u> %
	33-1/3 support test - 2008. If the	· ·	·		d the line 14 is 22		
	and <b>stop here</b> . The organization	qualifies as a pul	olicly supported o	rganization			▶□
ŧ	33-1/3 support test — 2007. If the and stop here. The organization				a, and line 15 is 3	3-1/3% or more, c	heck this box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	and-circumstance	s' test, check this	box and stop he	re. Explain in Part	IV how
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstance test The organi	s' test, check this zation qualifies a	s box and <b>stop he</b> s a publicly suppo	re. Explain in Part orted organization.	IV how the ▶
18	Private foundation. If the organi	zation did not che	ck a box on line,	13, 16a, 16b, 17	a, or 17b, check t	his box and see in	structions -

# Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I) Section A. Public Support (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Calendar year (or fiscal yr beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total, Add lines 1-5 7a Amounts included on lines 1, 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal yr beginning in) **(b)** 2005 (c) 2006(d) 2007 (e) 2008 (f) Total (a) 2004 9 Amounts from line 6 10 a Gross income from interest. dividends, payments received on securities loans, rents. rovalties and income form similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage % 15 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)). 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 % Section D. Computation of Investment Income Percentage % Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 % 19 a 33-1/3 support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule	A (Form 990	or 990-EZ	2) 2008	RICHAR	D &	LOI	<u>S GUN</u>	THER	FAM.	FOUNDATION	95-4690753	Page 4
Part IV	Supplem	ental In	format	i <b>on.</b> Com	plet	e this	part t	o prov	ide the	explanation	required by Part II, formation. (see ins	line 10;
•	1 01( 11, 111	10 174	JI 17 D,		-			ide diri	y outer	- additional in	iornation. (See ins	1 4 4 1 1 1 1 1 1
					- <b>-</b>							
					<b>-</b> -							
					- <b>-</b>							
					. <b>_</b> _							
	. – – – – .											
	. – – – – .											
- <b></b> -			- <b></b> -		<u> </u>			- <b></b>				
												*
			. – – –									
<b></b>	~							- <b></b>				

# SCHEDULE (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Employer Identification number Name of the organization RICHARD & LOIS GUNTHER FAM. FOUNDATION 95-4690753 Part | Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space 2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year a Total number of conservation easements 2a 2Ь **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2 c 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable vear ► Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Schedule D (Form 990) 2008 RICH					95-469			Page <b>2</b>
Part III Organizations Mainta	ining Collection	s of Art, Histo	rical T	reasures, or	Other Similar Ass	sets (c	ontını	ied)
<ol> <li>Using the organization's accessing that apply)</li> </ol>	on and other records	, check any of th	ne follow	ing that are a sig	inificant use of its col	lection i	tems (c	heck all
a 🔲 Public exhibition		<b>d</b> Loan o	or excha	inge programs				
<b>b</b> Scholarly research		e 🔲 Other						
c Preservation for future gener	rations							
4 Provide a description of the organization Part XIV				_		se in		
5 During the year, did the organiza	ation solicit or receive	e donations of art	t, histori	cal treasures, or	other similar	□ v		¬
Part IV Trust, Escrow and Cu						Yes		No
IV, line 9, or reported	an amount on F	orm 990, Part	X, line	e 21.	inswered res to		79U, P	art 
1a is the organization an agent, true included on Form 990, Part X?		•			er assets not	Yes	, [	No
<b>b</b> If 'Yes,' explain the arrangement	t in Part XIV and con	nplete the followi	ng table	!	· · · · · · · · · · · · · · · · · · ·			
						Amoun	it	
c Beginning balance					1c			
<b>d</b> Additions during the year					1 d			
e Distributions during the year					1e			
f Ending balance								
2a Did the organization include an a	amount on Form 990	, Part X, line 21?	•			Yes	. [	No
<b>b</b> If 'Yes,' explain the arrangement								
Part V   Endowment Funds Co	mplete if organiz	ation answere	<u>ed 'Yes</u>	s' to Form 990	), Part IV, line 10			
	(a) Current year	(b) Prior year	r	(c) Two years back	(d) Three years back	(e)	Four year	s back
1 a Beginning of year balance						<u> </u>		
<b>b</b> Contributions				-	<u> </u>			
c Investment earnings or losses								
<b>d</b> Grants or scholarships								
<ul> <li>Other expenditures for facilities and programs</li> </ul>						<u> </u>		
f Administrative expenses								
<b>g</b> End of year balance								
2 Provide the estimated percentage	e of the year end ba	lance held as						
a Board designated or quasi-endow	vment ►	<u></u>						
<b>b</b> Permanent endowment ►	<u> </u>							
c Term endowment ►	<sup>8</sup>							
3a Are there endowment funds not i	in the possession of	the organization	that are	held and admini	stered for the			
organization by							Yes	No
(i) unrelated organizations						3a(i)		
(ii) related organizations						3a(ii)		
<b>b</b> If 'Yes' to 3a(II), are the related of	organizations listed a	s required on Sc	hedule i	२१		3b		
4 Describe in Part XIV the intended								
Part VI Investments-Land, B	uildings, and Eq	uipment. See	Form	990, Part X,	line 10.			
Description of investment		st or other basis nvestment)		ost or other is (other)	(c) Depreciation	( <b>d</b> ) [	Book Va	alue
1 a Land								
<b>b</b> Buildings								
c Leasehold improvements								
<b>d</b> Equipment								
e Other								
Total. Add lines 1a-1e (Column (d) sho	ould equal Form 990	Part X, column	(B), line	10(c))				0.
244					<u> </u>	1.1.0.0		0) 0000

Schedule **D** (Form 990) 2008

Schedule D (Form 990) 2008 RICHARD & LOIS GUN			95-469	0753 Page <b>3</b>
Part VII   Investments-Other Securities See Fo	orm 990, Part X, lir	ne 12.		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuat Cost or end-of-year mark	ion et value
Financial derivatives and other financial products		ļ		
Closely-held equity interests				
Other COMMON STOCK		<del></del> -	<del></del>	<del> </del>
PREFERRED STOCK VIRGIN OIL	1,973,337.			
VIRGIN OIL COMMON STOCK	3,907,176.	COST		
		<u> </u>		
Total (Column (b) should equal Form 990 Part X, col (B) line 12)	5,880,736.			
Part VIII Investments-Program Related (See F	orm 990, Part X,	line 13)	N/A	
(a) Description of investment type	(b) Book value		(c) Method of valuat	ion
		ļ	Cost or end-of-year mark	et value
		ļ		
Total Column (b)(should equal Form 990, Part X Col (B) line 13)	ļ	<u> </u>		
Part IX Other Assets (See Form 990, Part X,	line 15) N/A	<u> </u>		
(a) De	scription			(b) Book value
			,	· · · · · · · · · · · · · · · · · · ·
				· · · · · · · · · · · · · · · · · · ·
	<u> </u>			
Total. Column (b) Total (should equal Form 990, Part X, co			<b>•</b>	
Part X Other Liabilities (See Form 990, Part	X, line 25)			
(a) Description of Liability	(b) Amount			
Federal Income Taxes				
DUE TO JEWISH COMMUNITY FOUNDATION	57,2	53.		
Total. Column (b) Total (should equal Form 990, Part X, col (B) line 25)				
Total: Oblanii (B) Total (Should Equal Form 550, Fart X, 601 (B) line 25)	► 57,2!	53.		

Schedule D (Form 990) 2008 RICHARD & LOIS GUNTHER FAM. FOL	INDATION	95-4690753	Page 4
Part XI   Reconciliation of Change in Net Assets from Form 990	to Financial Statements	N/A	
1 Total revenue (Form 990, Part VIII,column (A), line 12)			
2 Total expenses (Form 990, Part IX, column (A), line 25)			
3 Excess or (deficit) for the year Subtract line 2 from line 1			
4 Net unrealized gains (losses) on investments			
5 Donated services and use of facilities			
6 Investment expenses			
7 Prior period adjustments			
8 Other (Describe in Part XIV)			
9 Total adjustments (net) Add lines 4-8		-	,
10 Excess or (deficit) for the year per financial statements. Combine lines 3 a	nd 9		
Part XII Reconciliation of Revenue per Audited Financial State	ments With Revenue per	Return N/A	
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains on investments	2a		
<b>b</b> Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIV)	2 d		
e Add lines 2a through 2d.		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b	40	<b>⊢</b>   45	
	- 12)	4c	
5 Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line Part XIII   Reconciliation of Expenses per Audited Financial States			
•	tements with Expenses p	1 I	
1 Total expenses and losses per audited financial statements			
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	ا ما		
a Donated services and use of facilities	2a		
b Prior year adjustments	2b	$\dashv$	
c Losses reported on Form 990, Part IX, line 25	2c	<b>—</b>	
d Other (Describe in Part XIV)	2 d	_   _	
e Add lines 2a through 2d			
3 Subtract line 2e from line 1	1 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	<b>_</b>	
<b>b</b> Other (Describe in Part XIV)	4b	_	
c Add lines 4a and 4b		4c	
5 Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, lin	ne 18)	5	
Part XIV   Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d ar	9, Part III, lines 1a and 4, Part nd 4b	IV, lines 1b and 2b, F	art V,
		<b></b>	
			<b></b> _

TEEA3304L 12/23/08

Schedule **D** (Form 990) 2008

BAA

Schedule D	*(Form 990) 2008	Page 5
Part XIV	(Form 990) 2008 Supplemental Information (continued)	
•		

# SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22.
 Attatch to Form 990.

2008

OMB No 1545 0047

Open to Public Inspection .

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

**≗** Grants and Other Assistance to Governments and Organizations in the United States. Complete of the organization answered 'Yes' on Form X Yes 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use 95-4690753 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? SEE PART IV 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part I | General Information on Grants and Assistance RICHARD & LOIS GUNTHER FAM. FOUNDATION Part II

Part IV and Schedule I-1 (Form 990) if additional spac	Form 990) if addi	tional space is r	e is needed				•
1 (a) Name and address of organization or government	( <b>b</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Puipose of grant or assistance
AMERICAN JEWISH JOINT DISTRIBUTION COMM 13-1656634 711 THIRD AVE, 10TH FL	OMM 13-1656634	501 (C) (3)	10,000.	0			GENERAL SUPPORT
AMERICAN FRIENDS OF SHALOM HARTMAN INST 13-3014387 1 PENNSYLVANIA PLAZA, #1606 – – – NEW YORK, NY 10119	NINST 13-3014387	501 (C) (3)	10,000.	0			GENERAL SUPPORT
AMERICAN JEWISH WORLD SERVICE, INC. 45 W 36TH ST. NEW YORK, NY 10118	22-2584370	501 (C) (3)	25,000.	0			GENERAL SUPPORT
AMERICAN SUPPORTERS OF YEDID INC 301 E 69TH ST STE 17F	20-0426364	501 (C) (3)	10,000.	0.			GENERAL SUPPORT
AMERICANS FOR PEACE NOW, INC	13-3509867	501 (C) (3)	25,000.	0.			GENERAL SUPPORT
CENTER FOR ECOSYSTEM MGMT & REST 4179 PIEDMONT AVE STE 325 OAKLAND, CA 94611	94-3356594	501 (C) (3)	50,000.	0.			GENERAL SUPPORT
CITIZENS FOR RESPONS & ETHICS IN WA 1400 EYE ST, N W	03-0445391	501 (C) (3)	20,000.	0.			GENERAL SUPPORT
CONGREGATION BETH SHALOM 301 14TH AVE SAN FRANCISCO, CA 94118		501 (C) (3)	41,000.	0			GENERAL SUPPORT
2 Enter total number of section 501(c)(3) and government organizations	3) and government or	ganizations				•	35

Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

TEEA3901L 12/19/08

Schedule I (Form 990) 2008

(Form 990) 2008 RICHARD & LOIS GUNTHER FAM. FOUNDATION

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. Part III

|--|

Schedule I (Form 990) 2008

SCHEDULE 1-1 (Form 990)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

2008

OMB No 1545-0047

Open to Public Inspection

anization						Employer identification number	n number
RICHARD & LOIS GUNTHER FAM.	FOUNDATION						
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule	Other Assistan	ce to Governments	and Organization	s in the U.S. (Sched	Jule I (Form 990)	)), Part II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DREAM CATCHERS		501 (C) (3)					GENERAL
BRAVE FOUNDATION 10510 CULVER BL					-		SUPPORT
CULVER CITY, CA 90232	94-3209789		20,000.				
ESALEN INSTITUTE		501 (C) (3)					GENERAL
1	94-6114235		10.000.				SUPPORT
		501 (C) (3)					GENERAL
146 FIFTH AVENUE							SUPPORT
A 94118	94-3290824		25,000.				
GLOBAL EQUAL ACCESS, INC.		501 (C) (3)					GENERAL
38 KEYES AVE #3 BLD 38 THE PRESI							SUPPORT
SAN FRANCISCO, CA 94129	94-3402601		25,000.				
GRAMEEN FOUNDATION USA		501 (C) (3)					GENERAL
50 F STREET NW, 8TH FL							SUPPORT
WASHINGTON, DC 20001	73-1502797		10,000.				
JEWISH COMMUNITY FOUNDATION		501 (C) (3)					GENERAL
6505 WILSHIRE BLVD., #1200							SUPPORT
LOS ANGELES, CA 90048	95-6111928		70,103.				
JEMISH FAMILY SERVICE OF LOS ANG		501 (C) (3)					GENERAL
6505 WILSHIRE BLVD.							SUPPORT
48	95-1691013		10,000.				
JEWISH FEDERATION COUNCIL OF GRE		501 (C) (3)					GENERAL
VALLEY ALLIANCE 22622 VANOWEN ST							SUPPORT
WEST HILLS, CA 91307	95-1643388		30,000.				
JEWISH FUND FOR JUSTICE INC.		501 (C) (3)					GENERAL
2433 MAIN ST., #C							SUPPORT
SANTA MONICA, CA 90405	52-1332694		10,000.				
2 Enter total number of Section 501(c)(3) and government organizations	) and government or	ganizations				•	

<sup>2</sup> Enter total number of Section 501(c)(3) and government organizations3 Enter total number of other organizations

Schedule I-1 (Form 990) 2008

Ξ	
Щ	6
2	66
띺	Ē
SCI	9
•	_

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

2008

OMB No 1545-0047

Open to Public Inspection

Name of the organization						Employer identification number	on number
RICHARD & LOIS GUNTHER FAM. FOUNDATION	FOUNDATION.					95-4690753	
Part I   Continuation of Grants and Other Assistance to Gov	d Other Assistan	ce to Governments	ernments and Organizations in the U.S. (Schedule I (Form 990), Part II.	in the U.S. (Sche	dule I (Form 99(	0), Part II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH TELEVISION NETWORK INC.		501 (C) (3)					GENERAL
13/43, VENIUMA BLVD. SUITE 200 - SHERMAN OAKS, CA 91423	95-3556298		50,000.				SUPPORT
MEDIA MATTERS FOR AMERICA		501 (C) (3)					GENERAL
1625 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	47-0928008		25,000.				SUPPORT
NATIONAL COUNCIL OF LA RAZA		501 (C) (3)					DEMOCRACIA
İ	86-0212873		20.000				_
UND.		501 (C) (3)					ANNUAL
1101 14TH STREET NW, 6TH FL							SUPPORT
WASHINGTON , DC 20005	94-2607722		10,000.				
NEW ISRAEL FUND-SPECIAL PROGRAM-		501 (C) (3)					SPECIAL
1101 14TH STREET NW, 6TH FL							PROGRAM
WASHINGTON, DC 20005	94-2607722		25,000.				
NORTH AMERICAN CONF. ON ETHIOPIA		501 (C) (3)					GENERAL
132 NASSAU ST., #412	13-3187021		000 32				SUPPORT
PROGRESSIVE JEWISH ALLIANCE		501 (C) (3)					GENERAL
l							SUPPORT
LOS ANGELES, CA 90036	95-4739696		22,500.				
PROGRESSIVE POPULIST EDUCATION E		501 (C) (3)					GENERAL
1133 19TH STREET NW 9TH FL							SUPPORT
- 1	52-1454259		25,000.				
QUEENS COLLEGE FOUNDATION INC.		501 (C) (3)					GENERAL
CUNY 65-30 KISSENA BLVD.							SUPPORT
FLUSHING, NY 11367	11-6080521		10,000.				
2 Enter total number of Section 501(c)(3) and government organizations	3) and government or	ganizations				<u></u>	

<sup>3</sup> Enter total number of other organizations

SCHEDULE 1-1 (Form 990)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

2008

OMB No 1545 0047

Open to Public Inspection

Name of the organization						Employer identification number	n number
RICHARD & LOIS GUNTHER FAM.	FOUNDATION					95-4690753	
Part   Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule   (Form 990)	d Other Assistan	ce to Governments	and Organizations	in the U.S. (Sched	ule I (Form 990	. ~	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOJOURNERS		501 (C) (3)					GENERAL
REET NW							SUPPORT
0	23-7380554		10,000.				
ST. PAULS SCHOOL		501 (C) (3)					GENERAL
ENUE							SUPPORT
i i	94-1525621		12,500.				
TIDES FOUNDATION		501 (C) (3)					THE THIRD WAY
         						_	INSTITUTE
), CA 94129	51-0198509		10,000.				
TIDES FOUNDATION		501 (C) (3)					CATALYST
A 94129	51-0198509		20,000.		,		
TIDES FOUNDATION		501 (C) (3)					YOUTH
1		-					ENGAGEMENT
A 94129	51-0198509		20,000.				FUND
UNION OF CONCERNED SCIENTISTS, I		501 (C) (3)					GENERAL
2_BRATTLE_SQ							SUPPORT
02238	04-2535767		25,000.				
VALLEY BETH SHALOM-ACCRUAL		501 (C) (3)					GENERAL
							SUPPORT
	95-3847833		10,000.				
WOMEN AGAINST GUN VIOLENCE		501 (C) (3)					GENERAL
8800 VEINCE BLVD, SUITE 304					• • • •		SUPPORT
LOS ANGELES, CA 90034	95-4738754		7,500.				-
WOMENS_VOICES - WOMEN_VOTE		501 (C) (3)					GENERAL
1707 L STREET NW SUITE 750							SUPPORT
WASHINGTON, DC 20036	55-0889748		20,000.				
C Finish to the section 501(2)(3)	3) and anyonand or	odojatiaco				<b>A</b>	

Enter total number of Section 501(c)(3) and government organizations 2 Enter total number of other organizations

## SCHEDULE J (Form 990)

# **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

RICHARD & LOIS GUNTHER FAM. FOUNDATION

Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, line 23.

Open to Public Inspection

Employer identification number 95-4690753

Par	rt I Questions Regarding Compensation				
		_		Yes	No
1 a	a Check the appropriate box(es) if the organization provided any of the fo VII, Section A, line 1a Complete Part III to provide any relevant in	ollowing to or for a person listed in Form 990, Part information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)	į		
Ь	b If line 1a is checked, did the organization follow a written policy re of the expenses described above? If 'No,' complete Part III to exp	garding payment or reimbursement or provision of all lain	1 b		
2	Did the organization require substantiation prior to reimbursing or trustees, and the CEO/Executive Director, regarding the items che	allowing expenses incurred by all officers, directors, cked in line 1a?	2		
3	Indicate which, if any, of the following organization uses to establi CEO/Executive Director Check all that apply	sh the compensation of the organization's			:
	Compensation committee	Vritten employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
			l		
	During the year, did any person listed in Form 990, Part VII, Section	on A, line 1a			
	a Receive a severance payment or change of control payment?	·	4a		X
	b Participate in, or receive payment from, a supplemental nonqualif		4b		X
	c Participate in, or receive payment from, an equity-based compens If 'Yes' to any of 4a-c, list the persons and provide the applicable	· · · · · · · · · · · · · · · · · · ·	46		Λ
	in res to any or +a*c, list the persons and provide the applicable	amounts for each term in a art in			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-	8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did th	e organization pay or accrue any compensation			
	contingent on the revenues of	, J	_		
	a The organization?		5a		X
	Any related organization?		_5b		X
•	If 'Yes' to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did th contingent on the net earnings of	e organization pay or accrue any compensation			
	The organization?		6a	-	X
	Any related organization?	ļ	6b	$\dashv$	X
	If 'Yes' to line 6a or 6b, describe in Part III	Ţ			
	For person listed in Form 990, Part VII, Section A, line 1a, did the	organization provide any non-fixed payments not	ĺ	- 1	
•	described in lines 5 and 6? If 'Yes,' describe in Part III	organization provide any non-fixed payments flot	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued contract exception described in Regs section 53 4958-4(a)(3)? If '	I pursuant to a contract that was subject to the initial			
	contract exception described in Regs section 53 4958-4(a)(3)? If	Yes, describe in Part III	8		Χ

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2008

Schedule J (Form 990) 2008 RICHARD & LOIS GUNTHER FAM. FOUNDATION

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

Page 2

For each individual whose compensation must be reported in Schedule J, report compensation from the organization related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown c	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
<b>(A)</b> Name		(I) Base compensation	(ii) Bonus and incentive compensation	(iii) Other compensation	compensation	benefits	(B)(I)-(D)	reported in prior Form 990 or
MARVIN I. SCHOTL	€		. 0 		0	.0		0.
- 1	<u>(i)</u>	291,255	25,000	135,35	16,500.	34,310	502,423.	361
SIMONE SAVLOV	Ξ		0	0.	0	0.	0	0.
- 1	⊕	212,064	10,000	0	0	34,534		236,605.
R. STEVEN SHEAN	Θ	0	0.		0.		0.	
	⊕	168,622.	0	0	0.0	25,674.	194,296.	-151,903.
	Θ							
	(ii)	ĺ			             	 	! ! ! ! !	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Θ							
	€		                 				1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1
	ε							
	(ii)	       	               	!	 	k k f f l	1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1
	Θ							1
1	](ii)	 		 	 	  -  -  -  -  -  -  -	           	  -  -  -  -  -  -
	(i)							
	<b>E</b>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	Θ					1		
	(ii)		     	 	1		! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Ξ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
	€				   		 	; ; ; ; ; ;
	Ξ	 						
	€							i I
	Ξ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	€							
	€		             	             				
	€							]   
	Ξ							
	<u>(ii</u>						             	           
	Θ							
	▣							
	€		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	             	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
ВАА				TEEA4102L 08/11/08	80/		Sched	Schedule J (Form 990) 2008

BAA

Schedule J (Form 990) 2008

## SCHEDULE L (Form 990 or 990-EZ)

**Transactions with Interested Persons** 

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. OMB No 1545 0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization RICHARD & LOIS GUNTHER FAM. FOUNDATION C/O JEWISH COMMUNITY FOUNDATION 95-4690753 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Part I To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. 1 (a) Name of disqualified person (b) Description of transaction

(c) Corrected? 2 Enter the amount of tax imposed on the organization managers or disgualified persons during the year under

section 4958 Ś 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Loans to and/or From Interested Persons.

To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V. line 38a.

(a) Name of interested person and purpose	(b) Loan the orga	to or from	(c) Original principal amount	(d) Balance due	(e) In d	lefault?	(f) App by bo comm	ard or	(g) W agree	ritten ment?
	To	From			Yes	No	Yes	No	Yes	No
RICHARD & LOIS GUNTHER	X		145,000.	145,000.		Х	Х		Х	
RICHARD & LOIS GUNTHER	X		165,000.	165,000.		Х	Х		Х	
		-								
Total			<b>▶</b> \$	310,000.						

Part III Grants or Assistance Benefitting Interested Persons. To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction \$	(d) Description of transaction	(e) Sha organi; rever	aring of zation's nues?
				Yes	No
RICHARD GUNTHER	PARTNERSHIP		AMOUNT BELOW THRESHOLD		X

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule L (Form 990 or 990-EZ) 2008

(Form 990)  Related Organizations and Unrelated Partnerships  Department of the Treasury  Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.	Organizations and Unrelated Partnerships ed by organizations that answered 'Yes' to Form 990, Part IV, li	Unrelated Partn wered 'Yes' to Form 99 structions.	erships 3, Part IV, lines 33, 34, 3	35, 36, or 37.	2008 No. 1545-0047 2008 Open to Public Inspection
S GUNTHI	JEWISH COMMUNITY FO	FOUNDATION		Employer Identification number 95-4690753	cation number 53
Part I Identification of Disregarded Entities					
Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	( <b>D)</b> Total income	(E) End-of-year assets	(F) Direct controlling entity
					-
	,				
Part II Identification of Related Tax-Exempt Organizations	ıns				:
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
JEWISH COMMUNITY FOUNDATION	CHARITABLE ASSETS /				
6505 WILSHIRE BLVD., #1200 LOS ANGELES, CA 90048	PHILANTHROPIC SOLUTIONS				
111928	MANAGER	CA	501(C) (3)	6	N/A
BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instru	structions for Form 990.	13E	TEEA5001L 12/23/08	Schedu	Schedule <b>R</b> (Form 990) (2008)

95-4690753

(Form 990) 2008 RICHARD & LOIS GUNTHER FAM. FOUNDATION C/O JEWISH COMMUNITY FOUNDATION	Identification of Related Organizations Taxable as a Partnership
Schedule R (Form 990) 20	Part III Identificatio

ı	• (	ı	j			ı		I	ļ
	raj or raj or aging	ş							
,	(J) General or managing partner?	Yes			_				
	Code V-UBI amount in Box 20 of Schedule K-1	(Form 1065)							
	(H) Disproportionate allocations?	Yes No		-	•		 		
		X							 
	( <b>G)</b> Share of end-of-year assets								
	Share of total income Share of end-of-year assets								
,	(E) Predominant income (related, investment, unrelated)							:	
	(C) (D) Legal Direct domicile controlling entity (state or foreign		-				-		
	(C) Legal domicile (state or foreign	country)							
	<b>(B)</b> Primary Activity								
	(A) Name, address, and EIN of related organization			1					! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !

Trust
poration or
ble as a Cor
zations Taxa
ated Organi
ation of Rel
IV Identific
Part

(A) Name, address, and EIN of related organization	(B) Primary Activity	Legal domicile (state or foreign country)	(D) Direct controlling entity	Type of entity (C corp, S corp, or trust)	(F) Share of total income	(B) (C) (D) (D) (E) Type of entity (C corp., S corp., country) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(H) Percentage ownership
	T						
ВАА		TEEA5002L 12/23/08	1/23/08			Schedule R (Form 990) (2008)	990) (2008)

95-4690753

# Part V Transactions With Related Organizations

Note Complete line 1 if any earth, is listed in Darte II III or IV			_	1:
Touring the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV:	related organizations listed in Parts II-IV:		Tes No	<u>.</u>
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a X	ار
<b>b</b> Gift, grant, or capital contribution to other organization(s)			1 b X	ا. ا
c Gift, grant, or capital contribution from other organization(s)			1c X	١
d Loans or loan guarantees to or for other organization(s)			1d X	١
e Loans or loan guarantees by other organization(s)			1e X	ا _ ا
f Sale of assets to other organization(s)			×	
<b>a</b> Purchase of assets from other organization(s)				.l.
			-	.1.
i Lease of facilities, equipment, or other assets to other organization(s)			i-L	
j Lease of facilities, equipment, or other assets from other organization(s)			1j ×	
k Performance of services or membership or fundraising solicitations for other organization(s)			1k X	ال
I Performance of services or membership or fundraising solicitations by other organization(s)			11 X	ال
m Sharing of facilities, equipment, mailing lists, or other assets				ال
n Sharing of paid employees			1n X	ای
o Reimbursement paid to other organization for expenses			10 X	
<b>p</b> Reimbursement paid by other organization for expenses			1p X	ا. ا
q Other transfer of cash or property to other organization(s)			19 X	لی
r Other transfer of cash or property from other organization(s)	:		1r X	ال
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	this line, including covered relationships and	transaction threst	splor	ı
(A) Name of other organization		(B) Transaction type (a-r)	(C) Amount involved	
				1
				1
(2)				
(3)				1
(4)				I
(5)				
				I
(9) TEEA50031 07/02/08		Schedul	Schedule <b>R</b> (Form 990) (2008)	166

95-4690753

# Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships

יייים וייים יייים ווכן מיייים מולמווודמוים ככר ווייים וכלם	cgalanig evelusion for	ככו נמוון ווועכאווו בווון אם	icili partifei silips						
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal Domicile (State or Foreign Country)	Are all partners section 501(c)(3) organizations?	ners S	(E) Share of end-of-year assets	(F) Disproportionale allocations?	r- Code V-UBI amount in Box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?	al or ging ier?
			Yes	S S		Yes No		Yes	No
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
								_	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						<u> </u>			
			_						
				1					1
				_					
				+		+			
			_						
			_	·					
					ļ	_			
			_						
				$\dashv$		_			Ì
ВАА		TEEA5004L 01/21/09					Schedule <b>R</b> (Form 990) (2008)	) (990 ר	(2008)

# SCHEDULE O (Form 990)

# Supplemental Information to Form 990

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization RICHARD & LOIS GUNTHER FAM. FOUNDATION C/O JEWISH COMMUNITY FOUNDATION	Employer identification number 95-4690753
FORM 990, PART XI, LINE 2B	L-i
THE FOUNDATION'S FINANCIAL STATEMENTS WERE AUDITED ON A CONSOLIDATED BASIS.	
FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECT	
LOIS GUNTHER:	
WIFE OF RICHARD S. GUNTHER; MOTHER OF MARK H. & ANDREW J. & DANIEL P. GUNTHER	
RICHARD S. GUNTHER:	
HUSBAND OF LOIS GUNTHER; FATHER OF MARK H. & ANDREW J. & DANIEL P. GUNTHER	
MARK H. GUNTHER:	
SON OF RICHARD S. & LOIS GUNTHER; BROTHER OF ANDREW J. & DANIEL P. GUNTHER	
ANDREW_JGUNTHER:	
SON OF RICHARD S. & LOIS GUNTHER; BROTHER OF MARK H. & DANIEL I	
DANIEL P. GUNTHER:	
SON OF RICHARD S. & LOIS GUNTHER; BROTHER OF MARK H. & ANDREW	
FORM 990, PART VI, LINE 5 - DESCRIPTION OF MATERIAL DIVERSION OF ASSETS	
IN DECEMBER 2008, THE FOUNDATION LEARNED THAT ITS INDIRECT INVI	ESTMENT IN A
PARTNERSHIP WAS WORTHLESS. THE PARTNERSHIP HAD INVESTED ALL OF ITS FUNDS	
WITH A REGISTERED BROKER-DEALER WHICH WAS SUBSEQUENTLY FOUND TO HAVE	
PERPETRATED A FRAUD. THE PARTNERSHIP CURRENTLY HAS NO ASSETS A	AND THE
FOUNDATION HAS RECORDED A REALIZED LOSS OF APPROXIMATELY \$4.15	MILLION. THE
FOUNDATION HAS DETERMINED THAT IT HAS NO DIRECT RIGHT TO RECOVER FROM THE	
REGISTERED BROKER-DEALER.	
FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS	
THE FORM 990 IS COMPILED BY THE FOUNDATION'S TAX ACCOUNTING FI	RM AND REVIEWED BY THE
JEWISH COMMUNITY FOUNDATION'S ACCOUNTING STAFF AND VP OF FINANCE	CE AND ADMINISTRATION
BEFORE BEING E-MAILED TO THE BOARD AND SUBSEQUENTLY FILED.	

RICHARD & LOIS GUNTHER FAM. FOUNDATION C/O JEWISH COMMUNITY FOUNDATION	95-4690753	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCE	EMENT OF C	
THE ORGANIZATION'S WRITTEN CONFLICT OF INTEREST POLICY IS SEN	NT TO AND REQUIRES	
OFFICERS, DIRECTORS, AND COMMITTEE MEMBERS TO DISCLOSE, ON AN	ND ON-GOING BASIS (E.G.	
ANNUALLY) POTENTIAL CONFLICTS FOR THEMSELVES AND THEIR FAMILY	MEMBERS. THE	
PRESIDENT/CEO AND CFO OF THE JEWISH COMMUNITY FOUNDATION ("FO	OUNDATION"), A RELATED	
ORGANIZATION, REVIEW ANY DISCLOSED CONFLICTS AND SUBMIT ACTUA	AL OR POTENTIAL	
CONFLICTS TO THE BOARD OF THE FOUNDATION FOR REVIEW.		
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE		
UPON REQUEST	~~~~~~~~~~	
~		
	~~	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
	~~~~~~~~	